

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT(S)	<u>Complete if Known</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/810,356</td> </tr> <tr> <td>Filing Date</td> <td>March 26, 2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Furst et al.</td> </tr> <tr> <td>Art Unit</td> <td>3773</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Attorney Docket No.</td> <td>ICON 2 13110-1</td> </tr> </table>	Application Number	10/810,356	Filing Date	March 26, 2004	First Named Inventor	Furst et al.	Art Unit	3773	Examiner Name		Attorney Docket No.	ICON 2 13110-1
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Sheet 1 of 1													

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	Document No. Number-Kind Code (if known)	Publication/Issue Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-5,263,349	11/23/93	FELIX ET AL.	
	AB	US-5,437,744	08/1995	CARLEN	
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Examiner Initials*	Cite No.	Foreign Patent Document Country Code-Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T
	AM	CA 2172187	6/19/01	EURY		<input type="checkbox"/>
	AN	WO 01/41678	6/14/01	DUTTA ET AL.		<input type="checkbox"/>
	AO	EP 756853	2/5/97	WILLIAMS ET AL.		<input type="checkbox"/>
	AP	EP 734721	2/10/96	EURY ET AL.		<input type="checkbox"/>
		EP 714640	6/5/96	STACK ET AL.		<input type="checkbox"/>
						<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T
	AQ	Metals handbook Desk Edition, 2 nd Edition. Copyright 1998 by ASM Intl.	<input type="checkbox"/>
	AR		<input type="checkbox"/>
	AS		<input type="checkbox"/>
	AT		<input type="checkbox"/>
	AU		<input type="checkbox"/>
	AV		<input type="checkbox"/>

Examiner Signature		Date Considered	
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